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Adventure in Burma Told in Pictures

by

GORDON STIFLER SEAGRAVE

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ADVENTURE *in* **BURMA**



**GORDON SEAGRAVE BUILDS A
HOSPITAL • TOLD IN PICTURES**

Adventure in Burma

Told in Pictures

DR. GORDON S. SEAGRAVE
Builds a Hospital



Adapted by KENNETH L. WILSON
from *Tales of a Waste-Basket Surgeon* and News Stories
Illustrated by W. H. WICKHAM



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HERO OF BURMA

ADVENTURE IN BURMA

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The Land of the Road to Mandalay

YOU HAVE READ IT and heard it sung many times. You can even sing it yourself, recapturing some of the thrill Rudyard Kipling must have felt, as in a booming voice you bring the dawn up "like thunder." If you can find a copy of the poem, "On the Road to Mandalay," see how many of the places mentioned in it you can locate in this story.

10 miles 49 1/2 miles 30 miles

Men have been traveling the road to Mandalay for many, many years. Some of them have traveled with the weapons of warfare in their hands. Some have journeyed slowly, cautiously, burdened with much equipment, making a safari to mark them as brave hunters of cunning jungle beasts. Some have gone with drums of oil and with all manner of inventions and improvements to give the natives—at a price. Comparatively few have traveled the waterway from Rangoon to Mandalay on unselfish missions, bearing words of knowledge and life, offering gifts of healing and enlightenment without money or price. When a man goes up the road to Mandalay to kill, despoil, and exploit, he goes alone. But when he goes to give health, confidence, an unashamed face, God is with him because he is about God's business. It makes a difference to have God with you in the dripping heat of the underbrush or the sheer terror of narrow scabbled paths on the walls of precipitous ravines. Alone, you must believe your work is only for a day, or a month, or a year; you fight to get your job done and get back home. With God, you know your work is counting for dozens of years, for an eternity of years. With God, your heart is in your job. Where your work is, there is home. Where you are expending your life, your love, there is your habitation.

Gordon and Marion Seagrave had traveled the road to Mandalay before, and they had gone farther than that. The road to Mandalay was the easiest part of the journey, the part made smooth by the passage of multitudes. Even from Mandalay to Lashio, the outpost of the railroad that stretched its feeble parallel lines of gray silver across the heat and through the moisture-laden valleys, the course was fairly smooth and safe. Many are the men who stop at a com-

fortable Mandalay, or an easy Lashio. Only a man with hero's blood in his veins sets his face like a flint to journey on and on and on over the roughest, most heart-breaking roads to a Jerusalem—or a Namkham.

Yes, Gordon and Marion had traveled the road before. They had left behind their friends and loved ones in the United States for the friendless and unloved of Eastern Burma. They had gone to their hospital station after a long journey to Rangoon and then from Rangoon—only to discover that the “hospital” was little more than a heap of boards, unwashed disease-breeding boards. Gordon and Marion had answered the call of God, and God had come with them. Then at the end of the long road was only the filth-ridden shack to be their pulpit and dispensary. For a while it was a disappointment, but then Moses had once complained that he, too, had nothing to work with, and God had asked quietly, “What is that in thine hand?” Gordon and Marion answered in their hearts, “We have only this poor hospital—but we will use what we have.”

So well did they use what they had that the Namkham hospital and the God who inspired men to build hospitals to care for their brothers became the hope of Burma. From scores of miles away they came, bringing their sickness and infection, both of body and mind, and went away, usually with strengthened, cleansed bodies and often with regenerated minds. These people who lived beyond the conveniently reached cities marveled at the love and power of a man's God who would make him want to come into the unnamed villages and the unnamable jungles to give all that he had and ask nothing in return.

When a man has the faith to use what is in his hand, it becomes the outlet for God's power. Gordon and Marion used their hospital with so much consecration of purpose it became the means to a larger work. That is the story of this book. It is not a new story. It is the old story of faith, but this time the background is not a sandy expanse in Egypt or a lonely road in Palestine. This time it is a cloud-swept hill set above the dark, green-blanketed gashes that are Burma's valleys.

BACK TO BURMA

■

In his early days in Burma, Dr. Seagrave had encountered many difficulties. He had called himself the "Wastebasket Surgeon" because of his makeshift hospital, instruments, medicines. He had learned to make the most of what he had. But now he's going back to Burma—going with new interest, new ambitions, a big new plan that will accomplish more than he had ever dared hope for.



When Mrs. Seagrave and I were ready to return to Burma in 1930 for a second term, we had \$20,000.



It was the gift of Woodward Avenue Baptist Church in Detroit, and was for a new hospital as a memorial to



Dr. Harper, missionary in Namkham before us. Dr. Harper had lived an exceedingly full, dramatic life.



He had spent his young manhood in the Secret Service Department of the old Royal Irish Constabulary.



Then he went to Canada, where he served two years in the Royal Northwest Mounted Police. Being con-



verted there, he came to Detroit to study medicine, and afterwards became a medical missionary.



The hospital in his memory was to be a two-story stone building, eventually to have a hundred beds.

DR. HARPER

The Harper Memorial Hospital in Namkham is to be built in honor of a great medical missionary of the past. As Gordon Seagrave began to think about translating the plans into solid stone, he recalled his early meetings with Harper, and remembered how the Doctor influenced him to become a missionary. So now we turn to Gordon's early home in Rangoon on the bay.



I met Dr. Harper when I was a boy. He used to visit us at Rangoon and thrill us with wild stories.



Once Dr. Harper asked if we would like to see what a medical missionary could do. We nodded vigorously.



So he took the top of a dining room chair in his teeth and swung it up toward the ceiling with ease.



As a further demonstration, he drank a glass of water while standing on his head. After those



feats, my sister Grace and I both resolved to be medical missionaries. And who wouldn't have?



Dr. Harper was a great ambassador along the boundary which separates Burma, the Shan states, from China.



At one time a horde of raiders gathered in China, but withdrew thinking Dr. Harper might be hurt.

A DREAM COME TRUE

It seemed almost too good to be possible. For years Gordon and Marion had been planning just the kind of hospital they would like if they had the money to build it. Now they have the money! You can imagine their excitement and breathlessness—almost like two school children with a new Christmas present. In a way, this was a real Christmas present; it was for Christ, and his Burma people.

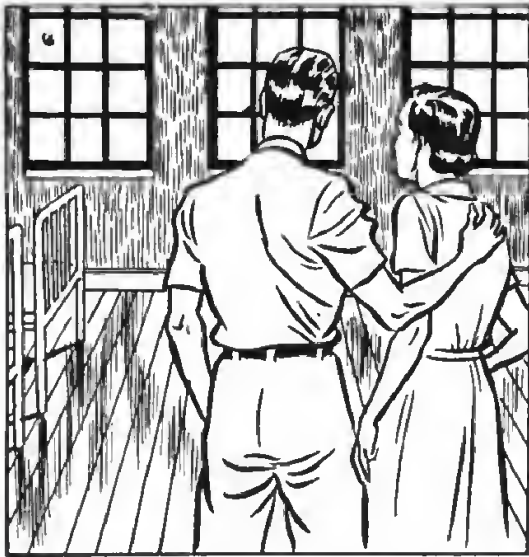


For a number of years, "Tiny," my wife, and I had planned just the sort of hospital we wanted some day.



We had picked out the site of this dream hospital—the brow of a hill where the building would stand—

and drew out the plans we wanted; a hospital that would furnish everything we didn't have in the old.



We wanted teak floors, to take the place of dirty floors of rotten jungle-wood, large, airy accommodations



for women and children as well as men; semiprivate and private rooms for those who wanted them;



an operating room with enough visibility so the surgeon would not be tempted to cut into the wrong



organs; an out-patient department where we could give treatments without all outsiders looking on.

BLUEPRINT FOR ACTION

■

Even when you have the funds with which to build a new hospital, there is still a great deal of work to be done. In fact, having the money is only the start! Blueprints, materials, tools, labor, were only a few of the headaches that Dr. Seagrave had. Some of them started in the States, and more of them kept popping up as the time grew nearer for actual construction.



In Detroit our plans were reviewed by a famous hospital architect. He made some slight changes for us.



Then the plans went to an architect in Granville, Ohio, who knew building in Burma as well as America.



The Ohio man adapted and blueprinted the plans for us. So then we had both the plans and the money!



On the way back to Burma, all the way across the Pacific, we tried to decide how to go about building.



Back at Namkham, I wrote to my father at Rangoon and asked him to send us a Ford truck, and ship



it to Mandalay. Tiny and I then planned to go there; she would drive the car back and I the truck.



Dad sent the truck fully loaded, since that was almost as cheap. But it was to cause us trouble later!

TRUCK TROUBLES

It seemed almost as if Dr. Seagrave's life was being measured by troubles. But very often, what we think troublesome at the time looks very funny from a distance. That truck Gordon's father had sent him, for instance. It was really a blessing—they couldn't have got along without it—but sometimes it seemed to be a very stubborn and belligerent blessing. Even from the very start.



When our truck arrived on the boat it was piled high. There were even some wicker chairs stacked on top.



Driving through Mandalay itself, we stopped to see Mr. Hinton, our missionary there. When he came



to the door he was shocked! He had never before seen a truck loaded like that. Then he told us some-



thing. There was a government rule that trucks of more than a half-ton carrying capacity were not allowed



to use the road. Sure enough, when we reached the foot of the mountain, there was a sign to that effect.



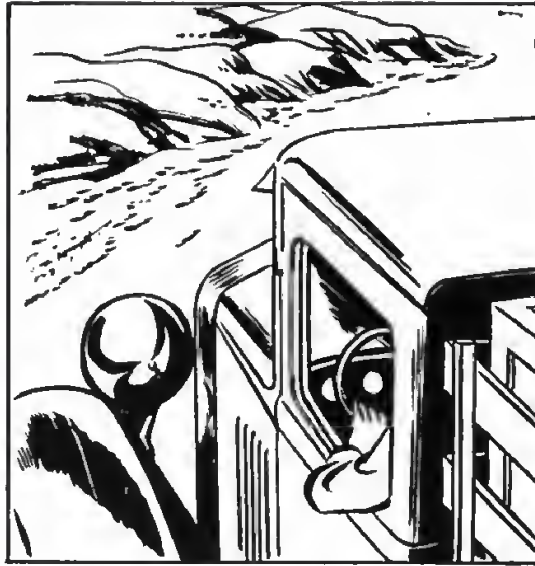
I could do only one thing: I turned into the jungle until dark. Then I beat it up the road, but fast!



On the way to Namkham, I had to get out every few miles and pick up chairs knocked off by branches.

ROUND AND AROUND

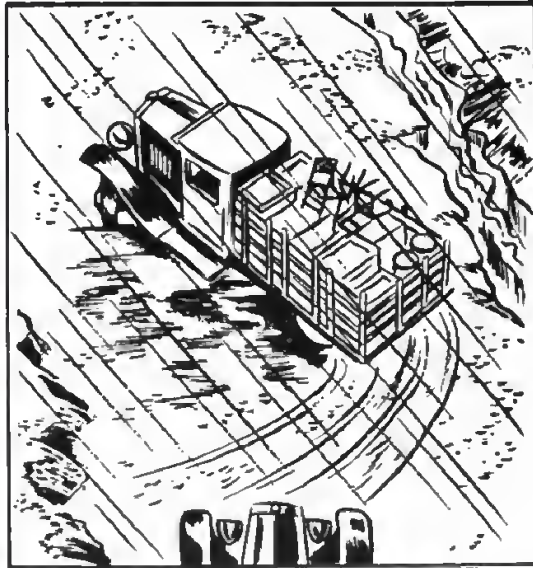
It is no slight trick to drive a heavily loaded truck on a good road in these United States in fine weather. Even a slight bump requires an extra shot of strength into your arms to keep everything under control. Imagine, then, driving such a truck over poor roads—practically no roads at all—and in pouring rain! But at least Mrs. Seagrave was following—or maybe that was bad for her!



Finally we got onto the red clay roads of the Northern Shan States. They are very slippery when it rains.



And of course it rained for us! It poured. How that truck could skid! Tiny was coming along behind me in



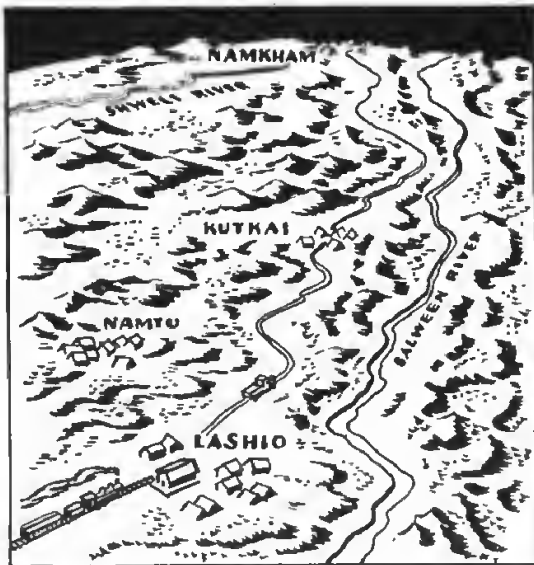
the Chevrolet—until she saw me turn end for end three times; then she decided it would be better



for her nerves if she went first. That way, she wouldn't have to watch me slide all over the road.



It took us twenty-four hours to go the first twenty-five miles of that road, but finally we were home!



Namkham is a hundred and thirty miles from the railroad at Lashio, the Northern Shan States capital.



We had to bring in the building material for our new hospital from there. They were thrilling rides.

TIGER AHEAD!

When you built in Burma, you couldn't order a load of ready-mixed concrete from a supply house. You couldn't ever have it delivered unmixed! It was necessary to bring all materials for the new hospital from the railroad terminus, Lashio. That is, all manufactured materials which could not be had at Namkham, only a very slight consideration. Lashio was a hundred and thirty miles away.



The road from Lashio is built right along the edge of some very dangerous precipices, so the Shan



drivers that I hired would often refuse to drive for the tons and tons of building materials we had



to get. Then I would drive myself, with Tiny as company. We would start early in the morning,



drive as fast as we could, and be at Lashio by three in the afternoon. We loaded up, and hurried back.



When I became tired, Tiny drove, and I crawled in the back of the truck to take a real nap. One



night I was sleeping back there soundly when Tiny put the brakes on in a hurry. The cement barrels



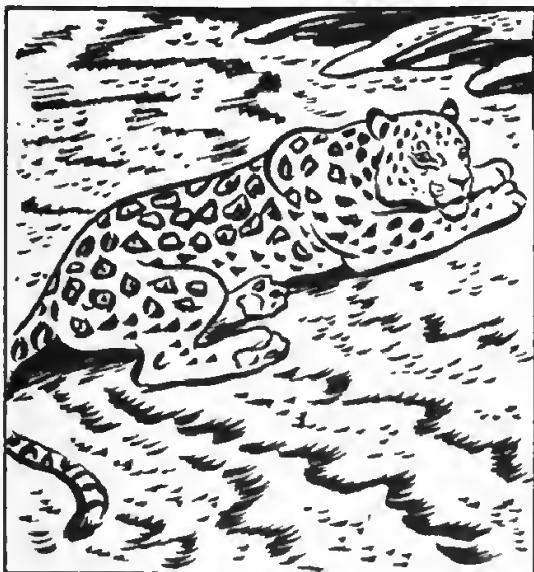
we were hauling began tumbling about me. Tiny shouted, "There's a tiger in the middle of the road."

NIMROD SEAGRAVE

How do you think *you* would act if you were suddenly awakened and informed there was a tiger in the middle of the road just ahead? It would probably take you a while to get your wits about you—and that is just the way it worked with Dr. Seagrave. He was quite willing to be brave, but he wanted to make sure what was going on, first. But there were other times—



By the time I could rouse myself enough to take a look, the tiger had disappeared. I felt very bad.



Another time, we turned a bend and found a big, fat leopard trying to get warm in the middle of the road.



I decided to do some good missionary work and shoot that leopard. I stopped the truck, snatched up my



.32 calibre rifle, climbed out of the cab on up by the hood of the engine. There I stood very bravely.



The leopard had wandered away by then. I was again embarrassed—but not nearly as much so as if



the big cat had come back, because I discovered the gun was unloaded! What a hunter I turned out to be.



I went to sleep while driving at another time, and we smashed a fender on a bridge, almost going over.

WORK BEGINS



The new hospital at Namkham is all ready to go. The money has been provided, a truck has been secured, much of the hauling has already been done. All that is ahead is the job of building—and what a job that promises to be! But Dr. Seagrave hadn't practiced as a wastebasket technician all these past years for nothing. With ingenuity, he remembers how to use "what is in his hand."



While in America on furlough, I had kept at my hobby of rummaging. In a corner of my mother-in-law's



garage in Illinois I found an old surveying telescope which Tiny's father had discarded years ago.



We used the old instrument now for surveying the site of the new hospital. My father helped me.



Then we began to dig for the foundations. All the digging was done with hand tools, earth trundled away



in wheelbarrows. Then we began to haul stone. I didn't know how much stone we needed, so I took our plans



to a Chinese gentleman for his advice. He said it would take so much stone. Later I discovered



that if we had hauled as much stone as he said to, the hospital would have been solid stone throughout!

ALL TOGETHER!

Stone was the cheapest and best material available. That meant, not telephoning someone for a load, but going out and getting it yourself. The Doctor was not sure his truck was meant for hauling stone, and he was positive the “roads” around Namkham were never meant for it. But with his corps of nurses assisting—and was he ever glad he trained them!—the stone was brought in gradually.



We took our stone from two brooks, trucked them away. Women gathered small stones and men large ones.



Coming back was a ride! We would rush full tilt down a “camel back” to get up speed to make a hill.



If there wasn't enough momentum to carry the truck up the hill, it meant backing down and trying it again.



Another hill on the trip had a sharp curve at the approach. If we had on too big a load, the truck would stall.



Then the nurses would be sent for and with fifteen pulling on the rope in front, ten pushing, we'd get up.



Ordinary Shan people are useless at pushing trucks. They merely lean against them and rest themselves.



After the truck was in everyone would hurry to the hospital and scrub up for the next operation.

A "SEAGRAVE VACATION"

It is a discouraging experience to buck up against building customs. But when you are sure you are right and your advisers are wrong—that is another thing. And when you have the knack of thinking up ways and means of accomplishing things, even to a "Seagrave Vacation," then you're well on the way toward being a successful businessman—or hospital builder.



We hauled a huge amount of stone, sand, and gravel. We burnt our own lime and molded our own brick.



"Namkham is in the mountains. It would make a good summer resort," my father suggested. It was a hint!



In Moulmein, eight hundred miles south, one of our missionaries had put up stone and brick buildings.



"Don't you need a short vacation?" I wrote Mr. Weeks. He replied that a week would do him much good.



To get ready, I imported a number of Burmese masons. They said most of the stones were too hard to cut.



I said we were going to build, not a cut-stone hospital, but one of cobblestones. They thought it couldn't



be done. When Mr. Weeks came, he showed us it could be done, and we fired the masons. We worked hard.

COBBLESTONE SKEPTICS



Stones were all around Dr. Seagrave's station in Burma—every gardener knew that—but no one had ever thought of using them for construction purposes. Burmese masons thought each stone would have to be cut individually and fitted into the walls. The Doctor began to show them they were wrong, but they still had trouble believing his words—and their eyes.



No one believed a cobblestone building would stand. As the building went up, natives came to inspect it.



Four dug their heels into the ground and tried with all their might to push the wall over. But the wall



wouldn't budge, and they were astonished. And at that time the mortar was not even dry! We



had timbers to be set in the walls for the upstairs floor, but I didn't know how to put them in. Also,



I had an electric-light plant—made possible by First Church of Altoona, Pa.—but I couldn't get it together.



Out went another invitation for a vacation, this time to the professor of physics, Judson College, Rangoon.



By the time Prof. Smith and his family had gone back to Rangoon, everything was under full control!

NOTHING BUT THE BEST!



Dr. Seagrave had found a neat way of securing help with the building of his new hospital. He merely invited people to Namkham for a short "vacation." For the unwary visitor it turned out to be more of a job than vacation. But the hospital profited. Dr. Seagrave made it a point to invite only skilled workers—men he knew could do the job that needed to be done.



Dr. Gates, biology teacher from Judson College, was another of our summer guests. He drove from



Rangoon, across the trackless desert belt of Burma, in his Whippet. It was a feat! He steered by stars.



He was a musician, too. He took our little Estey organ apart, put it together again with nothing left over.



When we began riveting our zinc water tank, we put him inside to hold a sledge against the rivets.



A coolie used the riveting hammer on the outside. Gates could tell by the sound when the rivet was tight.



But he knew nothing about a car, except that you push first one pedal and then another one. The rains



broke before he left, and I offered to go with him when he took his car to the railway. And a good thing.

MOUNTAIN DRIVER

■

Dr. Gates had accomplished much while he was in Namkham, but he waited just a little too long to start home. Maybe it was Seagrave's fault—finding too many jobs for his visitor to do. Burma roads in the rainy season were something that shouldn't happen to a native, let alone a college professor who believed that driving a car was a matter of pushing the right pedals. Anyway, the seasonal rains had come!



Mrs. Smith, her baby and nurse, went with us. The bridge across a river had been washed out, we saw.



We secured several dozen giant bamboos along the sides of native dugout canoes and ferried across.



I offered to drive, but Gates said no, that I had never driven a Whippet and this was no time to start.



Gates drove. Going down a mountain he always put on the brakes on a wet section. I learned a lot



that day about precipices! Again I offered to drive, but no! Finally we came to a point where the road



descended with two S-curves. When Gates saw what was ahead, he stopped, picked up his copy of *The*



Baptist which he always carried, got out and sat on a boulder. "You can have the ear," he said in disgust.

UPPER NAMPAW GORGE



Professor Gates from Judson College, with Dr. Seagrave's assistance and tactful advice, managed to come through his experience safely. But there were other experiences along the roads of Burma that didn't have happy endings. Roads were made not by construction but by common agreement. Bridges were often makeshift affairs quite capable of falling apart.



Something is always happening at the Upper Nampaw. Two buses have plunged over the bank into



the river, and five rear axles are broken there every year. The Government should put up bungalows



for the people who have to spend a night in the gorge! One day Tiny, the two children, and I were re-



turning to Namkham in the Chevy. About a half-hour from the gorge it began to rain. Reaching the river



we found another car already stuck on the bridge—an Indian driving a Chinese man to Namkham. We



tried in vain to push them up. Then they tried to push us up, but with no better success. We pulled bales



of grass and cut armloads of branches and scattered them over the road. Still no luck. Then—

A WET, DARK NIGHT

There is nothing much more uncomfortable than being out in your car somewhere, probably dozens of miles from home, have the car stall or become stuck, and then realize it is raining—if not cats and dogs, at least kittens and puppies. Clever as the good doctor of Namkham was, sometimes a situation was too much for even him, and there was nothing to do but sit it out gracefully.



We tried to back to the nearest shelter, but couldn't. At sunset we all quit and walked through the rain



a mile and a half to the nearest Palong village and made ourselves at home at the headman's house. We



had no food except a partridge I had shot that morning. We cleaned and ate it in the dark. It was



more than enough for all six of us, once we had tasted it! That night we all lay down together



and demonstrated the proper way to secure world peace. The rain came in, and the odors came up.



But, alas, the Upper Nampaw is no longer a source of stories. The Government has built a new road,



and constructed a steel bridge farther down the canyon across the once-troublesome mountain river.

MONEY MIRACLE



The twenty thousand dollars that Dr. Seagrave had brought to Burma with him seemed like a lot of money at the time. But when you take money to foreign countries, very often you get there with less than the amount you had when you started out, because of exchanges, taxes, and other deductions. Of this, the Doctor was sure: the hospital would cost a great deal more than they had.



Quite a bit of our original twenty thousand dollars for the new hospital was lost in exchanging it



into Burmese money. But our native friends gave small gifts and made up the amount missing. We



still needed twenty thousand more, but couldn't get it. We went ahead, anyhow, and built a forty thousand



dollar building! And without going into debt. Work was donated. Nurses worked after duty hours.



We would all pile into the truck and drive down to the river. Gates and the nurses would throw in



boulders, and we'd get in an extra load of stone every evening that way. One afternoon we were pouring



cement for the floor of the new operating room. We were working long overtime to get finished—

NO CLOCK WATCHERS



The work on the new hospital was progressing at a fast pace. Even the nurses were helping to haul stone—and doing that in addition to their regular work of taking care of patients. There was no labor trouble here, when it came to working overtime. Everyone had caught the spirit of the thing, from the local people to government representatives. It was a community—a national—project!



As we laid cement, the English Government official, Mr. Naylor, drove into town. He heard the singing,



shouting, and laughing, and thought a feast was going on. Then he saw the work and was very surprised.



"You must have to pay these men and women a great deal of money for working overtime," he said. I



told him that we were not paying them anything. They were working for nothing. That was too much



for Mr. Naylor. He took off his coat, rolled up his sleeves, and helped me mix the concrete. Later



he assisted me again with the electric wiring of the building, and made some fine suggestions.



That is the way the hospital was built. Everyone helped freely, without any thought of payment.

PLUMBING ADVENTURE



Dr. Seagrave begins what Sherlock Holmes might call "The Adventure of the Hospital Plumbing," or "Being a Plumber Is No Pipe." In fact, before he gets through, you will easily see that being a plumber—and an amateur one at that—is much more difficult in Burma than even in our own country. If the Doctor could lay end to end all the hours he spent on this part of the job—



We could not have a great hospital without some kind of sewage disposal plant. I wanted real bath-



rooms, with running water. But I could not afford to bring plumbers from Rangoon to do the work for us.



Plumbing had always looked easy to me, so I decided to do it myself. I went around with a yard-



stick and measured the hospital from top to bottom. I soon had a list of pipes about a yard long!



The list was sent to Rangoon, with instructions that the pipes were to be threaded accurately to measure.



Then my uncle and I went to Lashio, the railhead, to pick them up. This was the start of a big adventure.



The big pipes were twenty feet long and we could not put them in the back of the truck. We made slings.

TRAPPED!



Merely measuring the lengths of pipe needed was only a small part of Plumber Seagrave's task in Burma. Being in the business there meant driving off to Lashio to pick up the pipes that had been cut to order and shipped from Rangoon. There was also a certain amount of desperate hoping involved—that the pipes would all fit together properly when assembled at Namkham.



The pipes were put in slings on either side of the body of the truck. But my uncle, who weighs



two hundred twelve, had to climb in before we put the pipes in position, and I had to squeeze in

through the windshield opening at the last minute! We started off merrily, although the brake bands



had worn down and the brakes were none too tight. Coming to the Nampaw river, I started up the



S-curve from the bridge. The pipes prevented us from making the turn completely at the first. The engine



stalled, the brakes wouldn't hold, and we began to go back. Another foot and we would have dropped



into the river. And there were the two of us, not able to get out, inching slowly toward the river!

ONE FOOT FROM DEATH



Dr. Seagrave learned a number of things from his plumbing experience. The better part of wisdom decreed that never again should his stout uncle accompany him on a pipe-transporting expedition. It was highly uncomfortable for both uncle and nephew to feel their truck slipping toward a river bank with the older man securely pinned inside.



One foot from the river bank, I managed to stop the car by putting it in reverse and using both brakes.



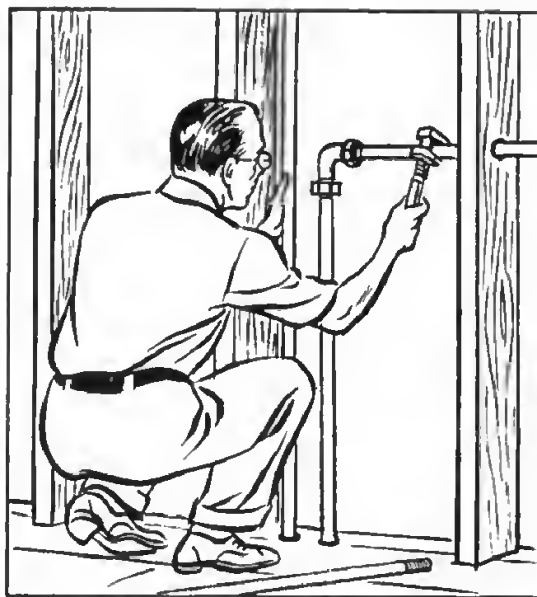
I climbed out to put a block under the back wheel, but Uncle had to sit tight and shudder—he couldn't



get out; when he tried, he just wedged himself in harder. Finally we succeeded in getting started



without going into the river. The truck went the remaining forty miles as beautifully as could be.



I spent the rainy season putting in the plumbing. Some of the pipes wouldn't fit, and I had to



saw them off. Then came the fun of filing on the threads—by hand! Finally, it was finished, and all



worked well for about six weeks. Then we found that patients had stuffed sticks in the plumbing!

BED LIVESTOCK

Now that the pipes had been brought in, and the Doctor had made out fairly successfully with filing threads on misfits by hand, and now that the plumbing system had been properly inaugurated by being carelessly jammed, there were other matters to consider. After all, a hospital needed beds—dozens of them. It was an empty victory to have a fifty-bed hospital, but less than fifty beds!



Finally our hospital was finished, and it was really a beauty. Visitors used to stand and look in awe!



When all was ready, we moved in beds from the old hospital, but we needed thirty more than we had.



The only lumber around was that left over from scaffolding. It was gnarled, twisted, and ant-eaten.



But the school children sawed it up and made our thirty beds for us. The termite holes became ex-



cellent hiding places. Each patient brought in a new breed of inhabitant, it seemed to us!



One day I passed a ward undergoing cleaning. I saw a nurse down at the foot of one bed. I looked



closer. She had a long needle and was carefully digging out bugs from the cracks in the wooden beds!

BUILDING FINISHED



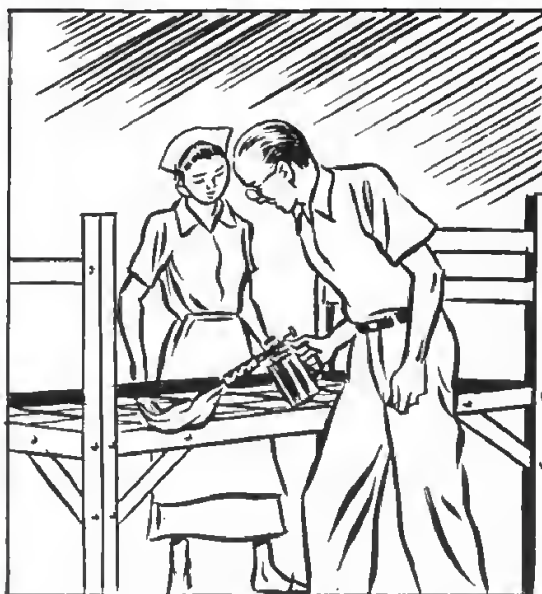
When Dr. Seagrave ran into a problem that would have stumped almost any expert, he began to try to find his way around the problem. Let other men wear out their heads barging straight into a stickler! It was this matter of beds. The old wooden ones had quickly acquired non-paying "patients" that could be rooted out only with perseverance. There must surely be some other answer!



I remembered seeing somewhere beds made of angle iron, and that was something plentiful in Burma.



A friend in Rangoon had the frames bent and welded for me, and sent them to us to rivet together in Nam-



kham. Now we can easily remove unwanted "patients" from the bed frames with a kerosene torch!



We even made the lamps for our new operating room. We bought four reflectors and attached them to a



frame so that the light is focused on the patient as he lies on the operating table. At last we had



an operating room easy to work in! The hospital was built without any fatal accidents, quite a record.



One boy of sixteen had a fall from the top of a wall, but he must have had a hard head and was not hurt.

HOMEMADE TEXTBOOK

■

The Harper Memorial Hospital was really getting under way! But now that the plant itself was finished, Dr. Seagrave had to turn his attention to the matter of nurses and their instruction. Nurses make a hospital. But to have nurses, you had to work out some way to teach them. They had to have a book to study. Well, the Doctor had done other jobs—maybe he could write a book.



We wanted Government recognition but for this we needed a textbook on nursing in Burmese. So, I had



to turn textbook writer. A Christian Chinese doctor gave me an intensive two-month course in Bur-



mese medical terms. Then I hired a Shan pastor who knew Burmese grammar to act as my secretary.



In that way, we wrote a two-volume work on nursing. My sister obliged with the section on Gen-



eral Nursing. She was more qualified to write it than I, for I could never enjoy bed making.



In college, my roommate and I used to make our beds once a week, fasten the bottom of the sheets



and blankets to the mattress with safety pins—and sleep for another week with clean consciences!

BURMA HARMONY



Just because the Namkham hospital was situated in the heart of Burma, Dr. Seagrave didn't think it had to be inefficient—or even unmusical. The Doctor had taken care of the efficiency angle, and now he had some time to devote to teaching the nurses to sing together. He knew there was nothing like singing to give a group the feeling that they were a part of each other, working together.



It has not been easy to teach our people to sing correctly, and Tiny and I hated to hear hymns murdered.



On a furlough we heard of a church that had stopped volunteer choirs and discarded all their old music.



We burrowed in their wastebaskets and recovered two cases of music. It helped us more than you know!



One case of music improved the singing of Judson College, the other has revolutionized singing at Nam-



kham. Now we were really getting the idea of good music across. One Christmas a Government official in



town came to our concert, probably expecting to be bored with cheap music. Imagine his surprise when



he heard choruses from Handel's *Messiah*, done not too badly. You don't expect that in the backwoods.

NO RACE PROBLEM

Burma has people of many different races living together in the one country. There had been racial discrimination of sorts before Dr. Seagrave came to Namkham, but there was no "race problem" in the hospital! No hospital could afford such a luxury—especially one in Burma. Each nurse had something to teach and something to learn. Every girl was an interesting person to know and talk with.



We have many fine nurses. Sein Byu was one of them. She came from a mission station and would rather



speak American than Burmese! What a kick we got out of having a girl who knew American kidding.



Girls in America like their hair to be short and wavy, and often go to beauty shops for permanent waves.



Girls in Burma would spend all they had to get the curl taken out if they were born with a "permanent."



They are very proud of the length of their glossy black hair. By tilting her head back a trifle, Sein



Byu can stand on her hair. And is she proud! Naomi, our other head nurse, is the tomboy and mimic.

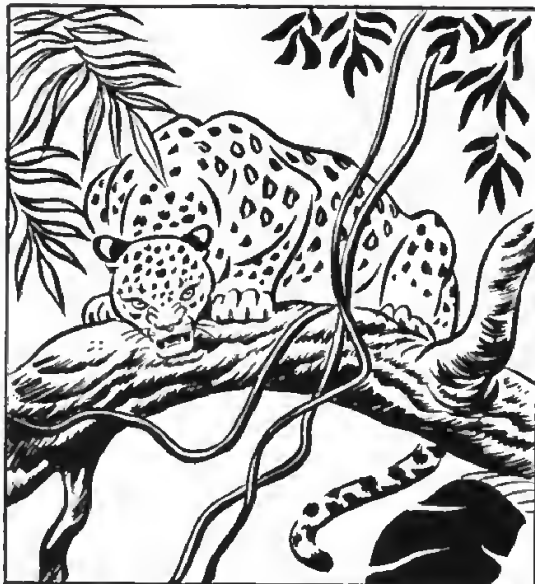


Wherever there is laughter, Naomi is in the middle of the group. She also pitches for our baseball team.

A STRANGE STORY

■

Dr. Seagrave knew plenty of good stories besides those about the building of his new hospital. Burma was a land of mystery, a land where anything might happen—and often did. This is one of those incredible tales from the heart of the jungle—the same jungle that surrounded the village of Namkham, marching up almost to the very houses on the outskirts. Always the jungle threatened the unwary.



Burma is full of real jungle where there is good hunting. A visiting English colonel once told



us an experience he had. He and three other officers marched happily off into the jungle for a big



hunt. They set up headquarters in a bungalow. Three of them went inside to sleep, but the other



sat on the verandah. Suddenly, inside, the colonel heard the man outside say desperately in a low,



strange voice: "Come and help me; he is taking me away!" The colonel rushed to the door. A huge



tiger had come up on the verandah. It was too lazy to kill the gentleman there on the spot. It had



the man's hand in its mouth, leading him away under his own steam. The scheming tiger was killed.

THE BURMA ROAD



Dr. Seagrave didn't know it, but a turning point in his life was fast approaching. The hospital was getting along beautifully, now that so many needed conveniences had been added. But just over the horizon a new threat was speeding toward Namkham, a threat able to blacken the sky with planes, able to send alert hordes of soldiers through the heat and horror of the jungles.



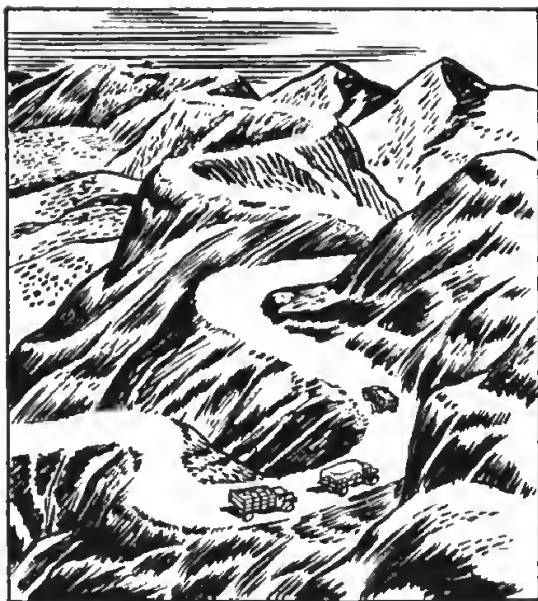
The hospital was finished. We were doing operations almost daily. The valuable nurses' training school was



going full blast every morning. We even got around to the point where Tiny and I built our own



little dream bungalow near the hospital. Then the Burma Road came in! From Lashio, it snaked



up right through Namkham, winding and twisting into China. That meant a great deal more work



—aiding the coolies who were working on the Road by the thousands. Most of them were sick



and many were injured at their posts. Most of them had malaria. The building of the Road became



a mad rush, to beat the Japs. Burma was a neutral country but would the Japs respect neutrality?

THE BOMBS FALL

■

The Burma Road was an avenue of war, and it passed right through Namkham. It was the lifeline of China, the fragile thread along which supplies and weapons were rushed to help China hold back the invaders. But still the invaders came on. War clouds were drawing nearer and nearer to the peaceful village where Dr. Seagrave had worked so long for health and security.



The terrors of war came closer, as the Burma Road went into operation. An important aircraft factory



was hurriedly built just across the valley from Namkham. I took on many additional responsibilities



there. We now had outlying hospitals along the Road, too, to be visited and superintended regularly.



Then Loilem, the factory site, was bombed! We had a constant stream of surgery patients from the scene.



The Japs were coming! We received orders to clear out, head for India. We hurriedly left Nam-



kham shortly before the Japs came in. Tiny and the children had previously gone back home to



America. I became a lieutenant-colonel with General Stilwell's retreating party headed for India.

A NEW JOB IN BURMA

War has come to Namkham! Dr. Seagrave is now Lieut. Col. Seagrave, U. S. Army Medical Corps. In this final story the Doctor of Namkham makes an appeal for builders. You know what has been done, what must be done in the future by someone brave enough, resourceful enough, Christian enough. Is Dr. Seagrave talking to you? Does his question, "Who will go?" point in your direction?



With the nurses, we began a long terrible march to India. It took weeks. It was necessary for us to



abandon almost all the medicines and equipment we had, and most of us were ill much of the time.



The news came: the Japs had taken over Namkham. They were probably living in the Harper Hos-



pital and in our dream bungalow. Then we heard that our forces had bombed Namkham barracks—per-



haps shattering all our work. But we could not grieve. Then we were in India, the long march over.



Out in Namkham there is a new job to do among the smoking ruins. The silent people of Burma



will need help more than ever after the war. I am afraid I will be too old to go back. Will you go?

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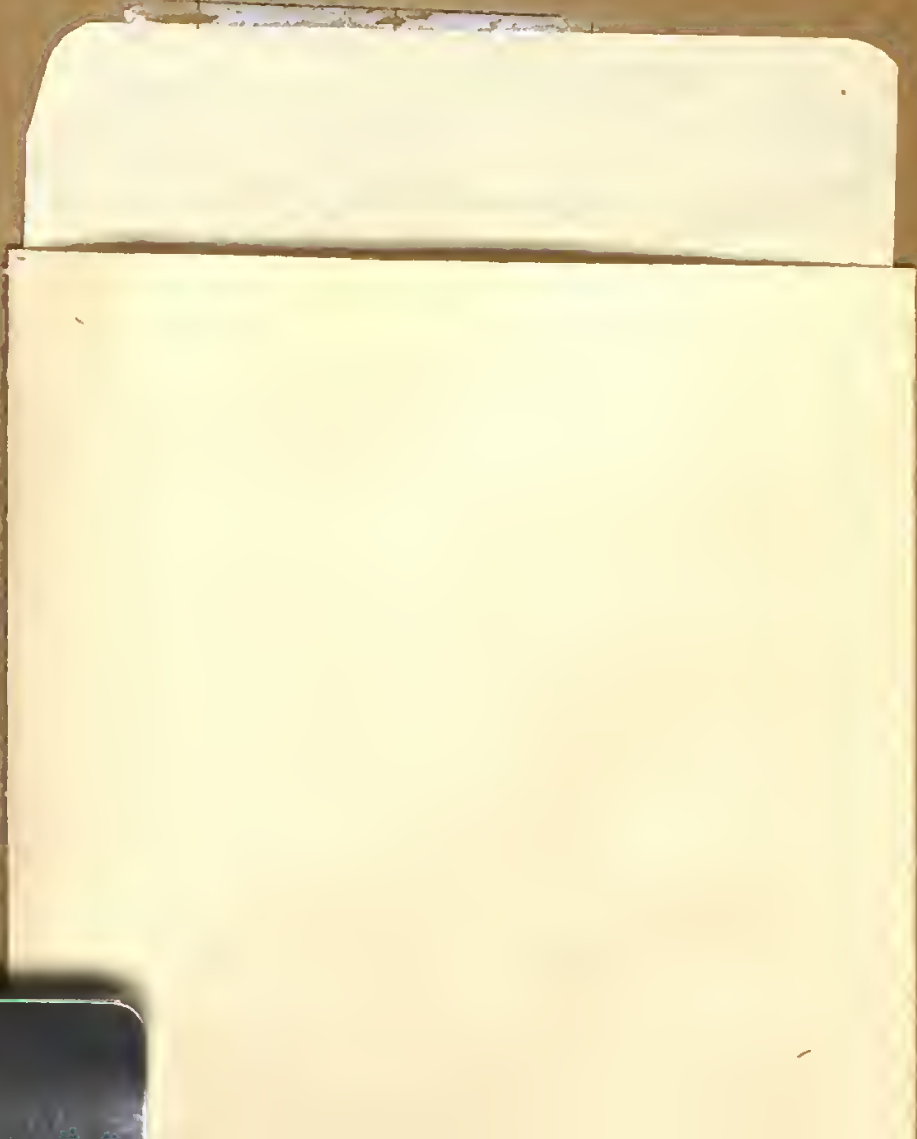


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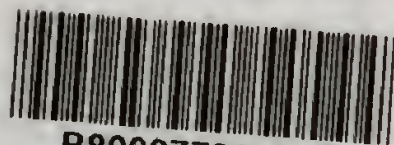
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